IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: **Berman et al.**	§	Group Art Unit: **2187**
	§	
Serial No.: **09/960,451**	§	Examiner: **Elmore, Reba I.**
	§	
Filed: **September 21, 2001**	§	Attorney Docket No.: **RSW920010141US1**
	§	

For: **Method and Apparatus for
Minimizing Inconsistency Between
Data Sources in a Web Content
Distribution System**

36736
PATENT TRADEMARK OFFICE
CUSTOMER NUMBER

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┌─────────────────────────────────────────────┐
│  Certificate of Transmission Under 37 C.F.R. § 1.8(a) │
│ I hereby certify this correspondence is being transmitted via │
│ facsimile to the Commissioner for Patents, P.O. Box 1450, │
│ Alexandria, VA 22313-1450, facsimile number (703) 872-9306 │
│ on April 22, 2005. │
│                                               │
│        By:   Carrie Parker                    │
│              Carrie Parker                    │
└─────────────────────────────────────────────┘
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TRANSMITTAL DOCUMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:
ENCLOSED HEREWITH:

* Response to Final Office Action; and
* Terminal Disclaimer

No fees are believed to be required. If, however, any fees are required, I authorize the Commissioner to charge these fees which may be required to IBM Corporation Deposit Account No. 09-0461. No extension of time is believed to be necessary. If, however, an extension of time is required, the extension is requested, and I authorize the Commissioner to charge any fees for this extension to IBM Corporation Deposit Account No. 09-0461.

Respectfully submitted,

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09960451
0003 090461
130.00 DA
05/10/2005 EWILLIAM 0000
01 FC:1814

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

KSW 9200101414151

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	75	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	75 minus 20=	55
INDEPENDENT CLAIMS	16 minus 3 =	13
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐ OR **OTHER THAN SMALL ENTITY**

RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X$ 9=		OR	X$18=	990
X40=		OR	X80=	1040
+135=		OR	+270=	
TOTAL		OR	TOTAL	2740

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	75	Minus	75	= 0
Independent	19	Minus	16	= 3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY OR **OTHER THAN SMALL ENTITY**

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	258
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	258

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	75	Minus	75	= 0
Independent	19	Minus	19	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total		Minus		=
Independent		Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
X$ 9=		OR	X$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875
(Rev. 8/00)